Highlights of the 2001 Annual Report

Utah experienced an outbreak of **coccidioidomycosis** among workers at an archeological site. The location of the outbreak occurred approximately 200 miles north of where C. immitus has been identified in Utah indicating that the endemic area may extend farther north than previously documented. The outbreak involved 10 cases that were non-Utah residents who are not included in this report.

Reported **cryptosporidiosis** cases increased from 28 cases in 2000 to 84 cases in 2001. A source for this increase was not identified however, some laboratories reported switching testing procedures from one that only screens for *Giardia* to one that also screens for cryptosporidiosis. Reported *Giardia* cases remained relatively the same with 281 cases reported in 2000 and 284 cases reported in 2001. We believe that the additional testing for cryptosporidiosis done as a result of this combined test led to the increased number of reported cases of cryptosporidiosis.

Hemolytic uremic syndrome (HUS) cases increased from 2 cases in 2000 to 13 cases in 2001. Both O157 and several non-O157 Shiga toxin producing *E. coli* (STEC) serotypes have recently been established as a major cause of bloody diarrhea and HUS. The CDC has recommended that specimens from patients with bloody diarrhea or HUS be tested for Shiga toxin, either initially or if stool cultures are negative for *Shigella, Salmonella, Campylobacter,* and *E. coli* O157. One explanation for the increase in reported HUS cases is that in the past, cases that were associated with *E. coli* O157:H7 infections were often only reported as *E. coli* cases and entered into our database as an *E. coli* case. The CDC recommendations may have increased the awareness of HUS caused by other STEC serotypes and influenced the reporting of HUS cases.

The number of ***Salmonella*** cases decreased by approximately 50% from 487 cases in 2000 to 229 cases in 2001. In 2000, 10% of confirmed cases were associated with single source outbreaks. In comparison, only 4 cases (1.75%) in 2001 were outbreak associated. Of the 487 cases in 2000, 299 (61%) were of the serotype *S. enteritidis*, the type of *Salmonella* frequently associated with undercooked eggs or poultry. In 2001, only 41 (17%) of the *Salmonella* cases were identified as *S. enteritidis*. Historically, Utah rates of *Salmonella enteritidis* (SE) have been high compared to the national average. Efforts have been made in recent years by the Department of Health, Department of Agriculture, the FDA and egg producers to improve egg handling practices and decrease rates of SE in Utah.

The number of ***Shigella*** cases decreased 23% from 82 cases in 2000 to 63 cases in 2001. Twenty-nine cases (46%) were identified as *S. sonnei* and twenty-five cases (39%) were *S. flexneri.* No common source outbreaks were identified. An average of 65 cases per year were reported over the past three years.

Eighty-nine females positive for **hepatitis B** surface-antigen during pregnancy were identified. Of those, 31 were reported to the UDOH Perinatal Hepatitis B Prevention Program prior to delivery.

The number of ***Chlamydia trachomatis*** infections increased by 37.1% from 2,191 cases in 2000 to 3,004 cases in 2001. This increase appears to have been due to a combination of increased testing for chlamydial infections in high risk populations and the use of more sensitive testing methods based on DNA amplification.